1 FAX Amplete and

PART B - FEE(S) TRANSMITTAL

this form, together with applicable fee(s), to: Maîl

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, edvance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate caused be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
LERNER, DAVI KRUMHOLZ & M 600 SOUTH AVEI WESTFIELD, NJ (NUE WEST 07090			c	ertificate of Mailing or Tran his Pec(s) Transmittal is bein with sufficient postage for fit iil Stop ISSUE FEE address PTO (571) 273-2885, on the	smission g deposited with the United set class mail in an envelope above, or being factimile date indicated below.
08/2005 TBESHAH2 000	100002 121095 1063	5170			····	(Depositor's name)
C:2501 700.0	Λ ηΔ					· (Signature)
C:1504 300 0	A no					(Dete)
GEORGIA DE SE O	O DH FILING DATE		PIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/635,170 08/06/2003 TITLE OF INVENTION: BALLOON ALIGNMENT AND COLLAPSIN			Patrick Davi	d Lopeth	TRANS 3.0-053 CIP	9166
MILE OF INVENTION; B	ALLOOIN ALIGNMENT A		15151EM		·	
APPLN. TYPE	SMALL ENTITY	issue pee		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	01/05/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
VRETTAKOS, PETER J		3739		606-027000		
Li Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	ence address (or Change of 12) attached. ion (or "Pee Address" Indicor or more recent) attached. Us	Correspondence ation form e of a Customer	or agents O. (2) the nam	es of up to 3 registered pairs, alternatively, e of a single firm (having as thorney or agent) and the napatent attorneys or agents. I me will be printed.	a member a 2KKUMHO	DEZ & MENTLIK, L
	RESIDENCE DATA TO B an assignee is identified be 37 CFR 3.11. Completion				mee is identified below, the	document has been filed for
***			(B) RESIDENCE: (CTTY and STATE OR COUNTRY)			
ProRhythm, Inc.			Setauket, New York			
		ries (will not be pri	nted on the par	ent): 🗖 Individual 🖺 (Corporation or other private gr	oup entity Government
a. The following fee(s) are Issue Fee	The following fee(s) are enclosed:		4b. Payment of Fee(s):			
To Dublication For Avenuel and discourse and and and		. 41	A check in the amount of the fee(s) is enclosed.			
Publication Fee (No small entity discount permitted) All Advance Order - # of Copies 13			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(a), or credit any overpayment, to Deposit Account Number 12-1095 (circless an axira copy of this form).			
		-	Deposit Accor	ont Number 12-10	95 (cinclose an extra c	copy of this form).
a. Applicant claims Sl	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.			LL ENTITY status. See 37 C	
he Director of the USPTO NOTE: The Issue Fee and Pr nterest as shown by the reco	is requested to apply the last ablication Fee (if required) virds of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	lon Fee (if any from anyone (Office.	or to re-apply any pravious other than the applicant, a re-	ly paid issue fee to the applic gustered attorney or agent; or t	ation identified above, the assignee or other party in
Authorized Signature				Date	11/7/05	
Typed or printed usme_	Arnold H.			Registration		
This collection of information application. Confidential submiring the completed applies form and/or suggestions	n is required by 37 CFR 1.3 by is governed by 35 U.S.C. plication form to the USPT far reducing this burden, at	11. The information 122 and 37 CFR 1 O. Time will vary a could be sent to the	is required to ,14. This colle depending upo Chief Informs	obtain or retain a benefit by ction is estimated to take 12 a the individual case. Any c tion Officer, U.S. Patent and	the public which is to file (an minutes to complete, includin omments on the amount of ti I Trademark Office, U.S. Dep	d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Parants, P.O. Box 1450,



PTO/SB/97 (08-00)

Approved for use through 10/31/2002. OMB 0551-0031
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number

FACSIMILE TRANSMISSION

ISSUE FEE TRANSMITTAL AND PUBLICATION FEE

ATTORNEY DOCKET NO.: TRANS 3.0-053 CIP

APPLICATION NO.: 10/635,170

CONFIRMATION NO.: 9166

MAILING DATE OF NOTICE OF ALLOWANCE: October 5, 2005

FAX NUMBER: (571) 273-2885

PAGES INCLUDING COVER SHEET: 2

PLEASE ACKNOWLEDGE RECEIPT TO SENDER AT (908) 654-7866.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on November 7, 2005
Date

Signature

Amold H. Krumholz; Reg. No. 25,428

Typed or printed name of person signing Certificate

iΠì

607797 LDOC